

**APPLICATION DATA SHEET**

**Application Information**

Application Type::	Regular
Subject Matter::	Utility
CD-ROM or CD-R?::	None
Sequence Submission::	Paper
Computer Readable Form (CRF)?::	Yes
Title::	Interferon-Alpha Polypeptides and Conjugates
Attorney Docket Number::	0269us410
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	7
Small Entity::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	United States
Given Name::	Phillip
Middle Name::	A.
Family Name::	Patten
City of Residence::	Portola Valley
State or Province of Residence::	California
Country of Residence::	US

Street of mailing address:: 261 La Cuesta Drive  
City of mailing address:: Portola Valley  
State or Province of  
mailing address:: California  
Country of mailing address:: US  
Postal or Zip Code of mailing  
address:: 94028

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: India  
Given Name:: Sridhar  
Middle Name::  
Family Name:: Govindarajan  
City of Residence:: Redwood City  
State or Province of  
Residence:: California  
Country of Residence:: US  
Street of mailing address:: 530 Osprey Drive  
City of mailing address:: Redwood City  
Country of mailing address:: US  
Postal or Zip Code of mailing  
address:: 94065

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: India  
Given Name:: Sridhar  
Middle Name::  
Family Name:: Viswanathan

City of Residence:: Menlo Park  
State or Province of  
Residence:: California  
Country of Residence:: US  
Street of mailing address:: 234 Leland Ave  
City of mailing address:: Menlo Park  
State or Province of  
mailing address:: California  
Country of mailing address:: US  
Postal or Zip Code of mailing  
address:: 94025

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Denmark  
Given Name:: Torben  
Middle Name:: Lauesgaard  
Family Name:: Nissen  
City of Residence:: San Francisco  
State or Province of  
Residence:: California  
Country of Residence:: US  
Street of mailing address:: 18 Henry Street  
City of mailing address:: San Francisco  
State or Province of  
mailing address:: California  
Country of mailing address:: US  
Postal or Zip Code of mailing  
address:: 94114

**Correspondence Information**

Correspondence Customer

Number:: 30560

**Representative Information**

Representative Customer	
Number::	30560

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Continuation-in-part	10/714,817	11/17/03
10/714,817	Application claiming the benefit under 35 USC 119(e)	60/502,560	09/12/03
10/714,817	Application claiming the benefit under 35 USC 119(e)	60/427,612	11/18/02

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::

**Assignee Information**

Assignee Name:: Maxygen, Inc.